

**ORDER**

U.S. DEPARTMENT OF TRANSPORTATION  
FEDERAL AVIATION ADMINISTRATION

WA 3100.5

2/14/89

SUBJ: FACILITATOR INTERN TRAINING PROGRAM

1. PURPOSE. This order establishes procedures and guidelines for the nomination, selection, training, utilization, and evaluation of facilitators at Washington Headquarters. It is designed to enhance implementation of the Facilitator Intern Training Program.

2. DISTRIBUTION. This order is distributed to all supervisors, managers, chairpersons of employee participation groups, and facilitators in headquarters.

3. BACKGROUND. As a result of the agency's movement toward a more participative style of management, there is a need for well-trained internal facilitators to assist headquarters organizations with various participative processes, such as employee participation groups (EPG's), teambuilding, and group problem solving. The Facilitator Intern Training Program (FITP) addresses this need. The Headquarters Human Resource Management Division, AHR-100, initiated the FITP during FY-87 and made several revisions to the program based on feedback from users and interns. Changes have been incorporated in this order.

4. DEFINITIONS.

a. Facilitator. A facilitator acts as neutral person whose primary role is to maintain an open and constructive atmosphere in a group so that issues may be thoroughly discussed and resolved.

b. Mentor. Typically a second year intern who models appropriate facilitator behavior and as a result of lessons learned from facilitating, provides counsel to first year facilitator interns.

5. FORMS. These forms can be obtained from M443.2. A sample of each form is listed in Appendix 1.

a. WA 3100-1 (12-88), Nomination Format For The Facilitator Intern Training Program

b. WA 3330-9 (2-86), Knowledges, Skills, and Abilities Evaluation

c. WA 3100-2 (12-88), Supplemental Qualifications Statement for the Facilitator Intern Training Program

d. WA 3100-3 (12-88), Manager Request for Facilitator Intern Services

e. WA 3100-4 (12-88), Facilitator Intern Training Program Manager Checklist

Distribution: A-W-3

Initiated By: AHR-100

- f. WA 3100-5 (12-88), Facilitator Intern Training Program User Evaluation
- g. WA 3100-6 (12-88), Facilitator Intern Training Program Assignment Evaluation
- h. WA 3100-7 (12-88), Facilitator Intern Training Program Time-Log

6. EXPECTED OUTCOMES OF TRAINING. Participants will be able to assist managers and groups in:

- a. Clarifying ground rules for meetings, defining objectives, helping to set agendas, monitoring time management, and aiding groups in action item follow-up.
- b. Conducting listening, problem solving, and action planning sessions.
- c. Ensuring participation and resolving difference among group members.
- d. Assisting with teambuilding sessions.
- e. Planning and facilitating conferences and retreats.

7. RESPONSIBILITIES. Program responsibilities are as follows:

- a. AHR-100 will:
  - (1) Recruit intern candidates.
  - (2) Select intern candidates.
  - (3) Manage interns' training and assignments.
  - (4) Fund training program requirements except for travel costs associated with training. Travel costs will be funded by the facilitator intern's organization.
- b. Interns will:
  - (1) Participate in all training sessions.
  - (2) Complete all assignments.
  - (3) Provide feedback to AHR-104 about the successes and problem areas of the assignments.

c. Managers will:

- (1) Ensure that all employees are aware of the program.
- (2) Nominate individuals.
- (3) Make interns available for training and developmental assignments.
- (4) Recognize their interns' accomplishments based upon an assessment of their performance; the assessment will be provided to managers by the Organization Development Staff.

8. QUALIFYING CRITERIA.

a. In order to qualify for the FITP, candidates must demonstrate evidence of the knowledge, skills and/or abilities outlined below:

- (1) Ability to lead and facilitate meetings.
- (2) Ability to work independently and complete assignments.
- (3) Ability to communicate orally, negotiate, advise others, and give presentations.

b. Applicants must also obtain the endorsement of their first and second-level supervisors in order to participate in the training program. The supervisors' endorsements will attest that the applicant has:

- (1) the stated skills outlined in paragraph 8a.
- (2) the support required to participate in the program during the 2-year intern period.

9. RECRUITMENT PROCEDURES.

a. Recruitment for the FITP will begin each year in November. The following methods of recruitment will be used:

(1) Each Executive Director may nominate up to 5 individuals. Organizations reporting directly to the Administrator may nominate one individual. Form WA 3100-1 provides the nominations format.

(2) Individuals may also self-nominate by completing the nomination information on Form WA 3100-1, and by obtaining the endorsement of their first and second-level supervisors.

b. All nominations must be submitted by close of business on the Friday of the second week in January and must include: a nomination; an SF-171; Knowledge, Skills, and Abilities Evaluation, Form WA 3330-9; and a Supplemental Qualifications Statement, Form WA 3100-2.

#### 10. SELECTION PROCESS.

a. The total selection process will consist of three stages. During the first stage, the Organization Development Specialist, AHR-104, will review each application to assure that the necessary documentation is attached. The Organization Development Specialist will then convene an independent panel composed of three or more FAA headquarters employees to score each application in compliance with the rating factors outlined in paragraph 8. The best qualified candidates will then be referred to the Organization Development Team in the Human Resource Management Division.

b. During stage two, applicants who are rated best qualified will be screened by another panel of FAA headquarters employees, using experimental assessment processes, to determine the degree to which they can demonstrate the skills, knowledge, and abilities outlined in paragraph 8. The best qualified will be selected to attend facilitator training.

c. The final stage will consist of one week of intensive facilitator training. Candidates will be evaluated on the ability to explain and use techniques for:

- (1) Writing on flip charts
- (2) Brainstorming
- (3) Setting norms/groundrules
- (4) Identifying issues/concerns
- (5) Selecting issues to be worked
- (6) Applying decision-making criteria
- (7) Managing conflict
- (8) Handling disruptive people
- (9) Giving and receiving feedback

d. After observing the above demonstrated behaviors, a panel of two external trainers will rate the participants' skills. Each skill will be rated on a scale of 1-5 with 1 meaning extremely weak, 3 meaning satisfactory, and 5, outstanding.

e. The Organization Development team in AHR-100 will select candidates into the program based on demonstrated facilitator skills, peer feedback, and trainers' recommendations.

# 11. PROGRAM ORIENTATION.

a. After candidates have been accepted into the program, each intern will participate in a 1/2-1 day program orientation.

b. During orientation, candidates will:

(1) Complete self evaluation inventories to identify areas of strength and specific areas that need further improvement.

(2) Review program procedures.

(3) Review program resources.

(4) Complete Individual Development Plans.

# 12. REPLACEMENT PROCESS AND DEVELOPMENTAL TRAINING.

a. Each year candidates will be recruited beginning in November and selected in February. Initial training will commence in March. Thereafter during both the first and second year, candidates will participate each quarter in the in-depth skills training and receive feedback. This training will range from 1/2 to 1 day sessions. On a periodic basis (based on the demand for facilitators), participants will receive developmental assignments, ranging from 1/2 to 2-3 days.

b. To facilitate further development of second year interns' consultation skills, each second year intern will select a first year intern to mentor.

c. Second year interns will:

(1) Co-facilitate with the first year intern during his/her initial assignment from the interview stages through completion of the assignment.

(2) Critique the intern's performance after his/her initial assignment and provide feedback.

(3) Act as a resource to the first year intern when the intern receives developmental assignments and completes an Individual Development Plan.

(4) Participate in quarterly feedback sessions to share facilitator learnings and to assist in monitoring the first year intern's skills development.

(5) Managers who supervise interns will ensure the participation of their nominees by making them available for training and development.

13. TERMINATION OF CANDIDATES. Candidates may self-select out of the program during any phase of the selection process and thereafter. Candidates who complete the selection process will be notified in writing within two weeks of their selection or non-selection into the program. Interns who indicate a lack of interest or who fail to complete assignments may be terminated at any phase of the program by the Organization Development Staff, AHR-104.

14. ASSIGNMENTS.

a. To take advantage of the program resources, managers who want to utilize program resources or the services of a facilitator should contact AHR-104 on 267-3884, and complete the Manager Request for Facilitator Intern Services, Form WA 3100-3.

b. Managers may request a facilitator to perform any of the services outlined in paragraph 6. The organization requesting a facilitator shall assume the cost for travel and travel-related expenses when facilitation occurs outside the facilitator's normal reporting location.

c. Usually, facilitators will be assigned to work outside their own organizations to maximize their objectivity. Prior to accepting an assignment, the facilitator will obtain the approval of his/her supervisor. Every effort will be made by AHR-104 to approve all requests for facilitators based on:

(1) Availability of the intern.

(2) Services requested.

(3) Type of assignment/issues to be addressed. (Some requests may require the services of an organization development specialist rather than a facilitator).

d. After a request has been approved, an FITP Manager Checklist, Form WA 3100-4 will be forwarded to the requesting organization to be used to assist the organization with the planning and pre-work requirements for the facilitator intern. The facilitator is responsible for contacting the requesting client manager to meet with him/her in advance of the actual assignment.

e. Prior to conducting the pre-work interview with the requesting organization, the facilitator will review the FITP Checklist for Pre-meeting in appendix II and use it as appropriate during the pre-work interview.

f. The user organization will assess the intern's performance on the FITP User Evaluation, Form WA 3100-5. The intern will evaluate his/her assignment on the FITP Assignment Evaluation, Form WA 3100-6.

g. On a monthly basis, interns will record the kind of service and time provided to organizations on the Facilitator Intern Training Program Time-Log, WA 3100-7.

15. EVALUATION.

a. Interns will receive feedback from the client managers and AHR-104 after each assignment and during periodic training sessions to enable them to improve their skills.

b. The overall FITP will be evaluated by user managers and facilitators each year. The program will be modified by AHR-100, with strong consideration of user and intern comments and suggestions, when deemed beneficial and appropriate.



Herbert R. McLure  
Associate Administrator for  
Human Resource Management, AHR-1





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## APPENDIX 1

### Sample Forms

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FIGURE 1. SAMPLE NOMINATION FORMAT FOR THE FACILITATOR INTERN TRAINING PROGRAM

NOMINATION FORMAT FOR THE  
FACILITATOR INTERN TRAINING PROGRAM

Name of Nominee: Mary Doe  
Title: Safety Analysis Specialist  
Organization: Safety and Analysis  
Telephone Number: 267-3100 Routing Symbol: ASA-12  
Name of Nominator: Tony Williams  
Title: Director, Safety and Analysis  
Organization: Office of Safety and Analysis  
Telephone Number: 267-3501 Routing Symbol: ASA-1

I certify that the above nominee meets the qualifying criteria as outlined in paragraph 8 of the Order-Procedures for the Facilitator Intern Training Program and has the support of management to participate in the program during the 2-year intern period.

Mary Doe  
Signature of Nominee

1/4/88  
Date

Judy Payne  
Signature of First-Level Supervisor

1/6/88  
Date

Tom Peters  
Signature of Second-Line Supervisor

1/13/88  
Date

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FIGURE 2. SAMPLE KNOWLEDGES, SKILLS, AND ABILITIES EVALUATION

**KNOWLEDGES, SKILLS, AND ABILITIES EVALUATION**

PLEASE HAVE THIS APPRAISAL COMPLETED BY YOUR SUPERVISOR  
AND SUBMIT IT WITH YOUR APPLICATION, SF-171 (if the appraisal is  
submitted directly by the supervisor, the applicant will be permitted to  
review and/or obtain a copy of the appraisal upon request.)

Announcement No. \_\_\_\_\_

Position \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Telephone No. \_\_\_\_\_

| Basis for Appraisal |                        |                 |                    | <b>RANKING FACTORS</b><br><b>Knowledges, skills, and abilities</b>               | Level of Performance            |   |   |   |   |
|---------------------|------------------------|-----------------|--------------------|--|---------------------------------|---|---|---|---|
| Check One           |                        |                 |                    |  | Please check (✓) as appropriate |   |   |   |   |
| Outside Activities  | On-the-Job Performance | Formal Training | Unable to Appraise |  | 4                               | 3 | 2 | 1 | 0 |
|                     | X                      |                 |                    | Ability to lead and facilitate meetings.   |                                 | X |   |   |   |
|                     | X                      |                 |                    | Ability to work independently and complete assignments.                          |                                 | X |   |   |   |
|                     | X                      |                 |                    | Ability to communicate orally, negotiate, advise others, and give presentations. | X                               |   |   |   |   |
|                     |                        |                 |                    |  |                                 |   |   |   |   |
|                     |                        |                 |                    |  |                                 |   |   |   |   |
|                     |                        |                 |                    |  |                                 |   |   |   |   |

COMMENTS. (Comments are required to justify "Outstanding" ratings. Continue on reverse side or attach additional sheets as necessary.)

As part of her duties, Ms. Doe communicates daily with FAA regional headquarters, and public sector staffs. She has briefed top level employees, including the Administrator. She has excellent oral and written communication skills.

In what capacity are you making this appraisal? (Please ✓ as appropriate)

☐ Present Immediate Supervisor  
☐ Former Immediate Supervisor

Period During Which You Supervised the Applicant:

From: 12/2/88 To: 1/88

Appraiser's Name (please type): Judy Payne  
Manager, Safety and Analysis

Appraiser's Signature: Judy Payne

Date: 1/6/88 Phone No.: 267-3500

WA 3330-9 (2-88)

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FIGURE 3. SAMPLE SUPPLEMENTAL QUALIFICATIONS STATEMENT FOR THE FACILITATOR  
INTERN TRAINING PROGRAM

SUPPLEMENTAL QUALIFICATIONS STATEMENT  
FOR THE FACILITATOR INTERN TRAINING PROGRAM

Name Doe Mary M.  
Last First Middle

Education Completed B.A. Education

Job Title Safety Analysis Specialist

Organization Office of Safety and Analysis Telephone 267-3100

Instructions for Completing: Please address the following factors, using a maximum of two sheets of paper. Indicate from your SF-171 the experience block or item number that supports your response.

1. Ability to lead and facilitate meetings.

Example: Completed FAA facilitator training  
(SF-171, item 31).

*See attachment*

2. Ability to work independently and complete assignments.

*See attachment*

3. Ability to communicate orally, negotiate, advise others, and give presentations.

*See attachment*

FIGURE 4. SAMPLE MANAGER REQUEST FOR FACILITATOR INTERN SERVICES

## MANAGER REQUEST FOR FACILITATOR INTERN SERVICES

Requesting Organization: *ABT-100*Date of Request: *10/17/88*Contact Person: *Al Jones*Routing Symbol: *AX3-100*Telephone Number: *267-3188*

Desired Service (check all which apply):

- ☒ planning and/or goal setting meeting  
☐ problem-solving session (problem already identified, desire group to identify causes, develop solutions, etc.)  
☐ listening session to identify issues and concerns  
☐ facilitating Employee Participation Group (EPG) meetings  
☐ observing/advising EPG meeting  
☐ recording key ideas, etc. at management meeting  
☐ participating as 3rd party to objectively monitor communication/conflict and assist with problem solving  
☐ other (please specify purpose/desired services)

*Identify issues resulting from transition of new manager and action plan them with branch.*

Specific facilitator intern requested (if applicable):

Requested dates: *10/27*Estimated total hours/days of facilitator services required on these dates: *7*

Previous Facilitator Use:

- ☐ 1st time request for facilitator  
☒ Have previously used facilitator services

\*\*\*\*\*

## TO BE COMPLETED BY AHR-104

- ☐ Facilitator Assigned (name) \_\_\_\_\_  
☐ User Checklist Provided  
☐ Facilitator Assignment Completed  
☐ User Critique Returned  
☐ Facilitator Intern Critique Returned  
☐ Follow-Up Required: (What and by whom)

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FIGURE 5. SAMPLE FACILITATOR INTERN TRAINING PROGRAM MANAGER CHECKLIST

FACILITATOR INTERN TRAINING PROGRAM MANAGER CHECKLIST

Before providing assignments to facilitator interns, managers should consider the following:

1. What are your desired outcomes for the meeting?  
*To involve staff in goal setting and action - planning*  
*To help group understand my management style*
2. How many people will be involved? Who? How will they be involved?  
*8 1 team leader As active participants*  
*1 secretary*  
*5 specialists*
3. Why do you want to use a facilitator?  
*I want a trained and objective person to manage the meeting. I'm*  
*afraid people won't talk if I facilitate the meeting.*
4. What are your expectations of the facilitator?  
*I want the facilitator to monitor our time and help us to complete*  
*an action plan.*
5. How much time will be involved? When?  
*1 day 11/27/88*
6. Where will the meeting(s) take place?  
*Old Colony Inn*  
*Alexandria, Virginia*
7. What materials will be needed (e.g., blackboard, flip chart, tape, magic markers, name tags, a/v equipment)?  
*Flip Charts*  
*Magic Markers*
8. Who will make the arrangements?  
*Secretary*

WA Form 3100-4

FIGURE 6. SAMPLE FACILITATOR INTERN TRAINING PROGRAM USER EVALUATION

## FACILITATOR INTERN TRAINING PROGRAM USER EVALUATION

NAME OF FACILITATOR Mary Doe ROUTING SYMBOL ASA-1

When the facilitator completes his/her assignment with you, please provide us the following information. Return this evaluation to AHR-104 in room 516.

1. How was the use of a facilitator in your meeting helpful?  
*The facilitator managed group conflict and kept the group focused on the issues.*
2. How did your meeting design work?  
*Very well. Our expectations were met at every phase of the design.*
3. What about your meeting design did not work well?  
*Building in another day for action planning.*
4. Did your group accomplish its desired outcome (s)?  
*Yes.*
5. Other comments, suggestions?  
*I was glad that I did not facilitate the meeting myself.*

Please rate the facilitator on the following: Low High

|   |             |
|---|-------------|
| Communications skills<br>(Facilitator expresses him/herself clearly and concisely)        | 1 2 3 4 (5) |
| Listening skills<br>(Facilitator gave sense of having understood participants)            | 1 2 3 4 (5) |
| Process Management<br>(Group progressed toward objectives)                                | 1 2 3 (4) 5 |
| Knowledge and flexibility<br>in using techniques  | 1 2 3 (4) 5 |
| Rapport (Facilitator worked easily with people)   | 1 2 3 4 (5) |
| Objectivity (Facilitator did not take sides)  | 1 2 3 4 (5) |
| Credibility with the group<br>(Group had confidence in what the facilitator said and did) | 1 2 3 (4) 5 |

Manager's Signature Al JonesDate 10/27/88

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FIGURE 7. SAMPLE FACILITATOR INTERN TRAINING PROGRAM ASSIGNMENT EVALUATION

FACILITATOR INTERN TRAINING PROGRAM ASSIGNMENT EVALUATION

After completing your assignments, please provide us the following feedback. Return this evaluation to AHR-104 in Room 516 or put in the internal mail system.

Facilitator: Mary Doe

Phone: 267-3100

Client (name and organization): Ben Pole, AHR-100

Pre-meeting held: 10/19/88

Assignment Completed: 10/27/88

1. What was the "product" of your assignment?  
*Help with the transition of the new branch manager.*
2. What worked well for you?  
*Having a lot of flexibility with the agenda.*
3. What did not work well for you?  
*Normally, I like to interview participants before the meeting, but I didn't have time. It worked out OK.*
4. Did you conduct a pre-meeting with the manager? How did this meeting contribute to your effectiveness?  
*Yes, this meeting was very helpful.*
5. Did you receive effective support from the manager(s) involved?  
*Total support - He allowed me to design the meeting completely.*
6. What techniques did you use? Were they effective? Explain.  
*Visualization of - what if this was a perfect branch - what would it look like? Group drew pictures of this and explained these.*
7. What difficulties did you encounter in implementing the facilitator process?  
*As always, getting people awake and alive in the morning.*
8. Is this a continuing assignment (i.e., is any follow-up required)? By whom?  
*Yes, we will follow-up in six months.*
9. Would you want to work with the same group on another assignment?  
*Yes*
10. What additional or different preparation would you do in the future based on what you learned in this assignment?  
*I recommend two days instead of one.*

WA Form 3100-6 (12-88)



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FIGURE 8. SAMPLE FACILITATOR INTERN TRAINING PROGRAM TIME-LOG

| FACILITATOR INTERN TRAINING PROGRAM TIME-LOG |                               |
|--|-------------------------------|
| Name:  | <u>Mary Marie Doe</u>         |
| Routing Symbol:                              | <u>ARR-12</u>                 |
| Organization(s) Serviced:                    | <u>ARR-100</u>                |
| Dates:                                       | <u>10/19/88 - 10/27/88</u>    |
|  | <u>Number</u><br><u>Hours</u> |
| Assignment:                                  |                               |
| Pre-Work                                     | <u>3</u>                      |
| Meeting                                      | <u>12</u>                     |
| Follow-up/Reports Out                        | <u>1</u>                      |
| Training Activities                          | <u>          </u>             |
| TOTAL:                                       | <u>16</u>                     |

WA Form 3100-7



**APPENDIX 2. FACILITATOR INTERN TRAINING PROGRAM CHECKLIST FOR  
PRE-MEETING**

Before beginning your assignments, please review the following questions and use the checklist appropriately in your planning and pre-work interview with the client manager.

- \* Why do you want a facilitator?
- \* What concerns will we be addressing in this meeting/workshop/session?
- \* What are your desired outcomes (i.e., what do you want to happen/accomplish/be produced)?
- \* What background information about the situation would be necessary/helpful for me to know?
- \* Are there any constraints I should know about? (time frames, things manager wants to avoid, etc.)
- \* Have you used a facilitator before? If so, what worked well? What didn't work?
- \* What are your expectations of me in the role as a facilitator?
- \* What will your (the manager's) role be in the meeting? (Who will begin the meeting, describe outcomes, make introductions, etc.?)
- \* Who will be at the meeting (how many, names, "positions", etc.?)
- \* What can you tell me about your group members that would enable me to be effective in working with them?
- \* Are there any ground rules or norms that I should know about?
- \* Where will the meeting be? If outside FAA, what is the room arrangement? Who will make the arrangements?
- \* Will we need any equipment? If so, who will arrange for it?
- \* Once the meeting is over, are there any actions that I will need to complete? Who will handle the typing of anything produced at the meeting?
- \* Is there anything that you want to know about me (the facilitator) before we work together? Do you foresee any problems with working with me?

